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CONFIRMATION NO. 8213

<b>SERIAL NUMBER</b> 10/568,466	<b>FILING OR 371(c) DATE</b> 02/14/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1617	<b>ATTORNEY DOCKET NO.</b> X16410		
<b>APPLICANTS</b> Albert John Allen, Indianapolis, IN; Douglas Kenneth Kelsey, Zionsville, IN;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/25593 08/25/2004 which claims benefit of 60/498,146 08/27/2003						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/15/2006</b>						
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	Allowance <i>Rene Clayton</i> Examiner's Signature	Initials <i>RC</i>	<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 25885						
<b>TITLE</b> Treatment of pervasive developmental disorders with norepinephrine reuptake inhibitors						
<b>FILING FEE RECEIVED</b> 1900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		